Information for Admission to M. Tech. Programmes under CCMT 2015 Process

The candidates who got seat allotment under CCMT 2015 process (in all rounds including NSR round) for admission into M.Tech. programme of National Institute of Technology, Tiruchirappalli (NITT) for the academic year 2015-16 are requested to report at NITT campus for Admission and Hostel allotment as per the following schedule/details given below:

1. Reporting Details for admission:

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Reporting Date for Admission</th>
<th>Specialization</th>
<th>Venue &amp; Time</th>
</tr>
</thead>
</table>
| 1       | 22.07.2015                   | 1. Environmental Engineering  
2. Transportation Engineering and Management  
3. Structural Engineering  
4. Material Science and Engineering  
5. Industrial Metallurgy  
6. Welding Engineering  
NIT, Tiruchirappalli  
(Assemble at Room No.15/16/17 for document verification and then proceed to Room. No.11 for Admission)  
9:30 a.m. to 3:00 p.m. |
| 2       | 23.07.2015                   | 1. Computer Science and Engineering  
2. Communication Systems  
3. VLSI System  
4. Power Electronics  
5. Power Systems  
6. Process Control and Instrumentation | |
| 3       | 24.07.2015                   | 1 Chemical Engineering  
2. Energy Engineering  
3. Thermal Power Engineering  
4. Industrial Safety Engineering  
5. Manufacturing Technology  
6. Industrial Engineering and Management | |

Class work will commence on 27.7.2015

4. Original Certificates to be produced by the candidate at the time of Admission

   i. Signed Document verification Notice (DVN) issued by the reporting centre officials
   
   ii. Printout of the Provisional Seat Allotment Letter generated after paying balance institute fee
   
   iii. Proof of payment of part Institute fee (Rs.20,000/-) for all candidates and proof of payment of balance institute fee (Rs.23,800/-) for OB/OC candidates.
iv. Transfer Certificate issued from the institute last attended
v. Migration Certificate
vi. GATE score card (2014/ 2015)

vii. Statement of marks or Grades obtained in the qualifying Examination

viii. Degree / Provisional Certificate.

ix. Course completion certificate for result awaiting candidates

x. Birth certificate or Class X Board Certificate as proof of date of birth.

xi. Class XII certificate

xii. Certificate of physical fitness obtained from medical officer as per the prescribed format given in Annexure-II

xiii. Certificate of category (OB / SC / ST), if applicable, issued by the competent authority as per the prescribed format given in Annexure-II (OB category certificate must be issued on or after 1.4.2015)

xiv. Certificate for Persons with Disabilities (PWD) issued by Medical Board notified under PWD Act (format given in Annexure-II)

xv. PWD certificate issued by the reporting centre

xvi. One set of attested copy of all the documents listed above from (iv) to (xiv).

Note:

- If any certificate is in languages other than Hindi or English, true copy of the same in English version is to be produced.
- Bring 4 Nos of recent colour photographs (2 Passport size and 2 stamp size)
- Candidates are advised to keep SCANNED COPY of all their original certificates and sufficient number of attested photo copies of all the certificates for their future use since all the Original Certificates submitted to National Institute of Technology, Tiruchirappalli will be retained in the Institute till the completion of the M.Tech. programme or till the withdrawal of admissions.

a. Those candidates who have appeared for final semester/year examination, provisional admission is permitted provided their final marks are made available on or before 15th September, 2015.

b. Any candidate admitted provisionally shall produce the provisional/degree certificate and all mark lists in original on or before 15th September, 2015. Else, their admission shall stand cancelled automatically. For such candidates refund will be made as per the applicable institute norms.

c. All M.Tech. students will get the Stipend only after the submission of Consolidated Mark/Grade sheet, Degree/Provisional certificate to this Institute and the Stipend will be paid only from the date of submission or the date of joining at institute(NITT) whichever is later.
5. Fee to be paid at the time of Admission

a. Institute Fees

Already Paid through CCMT 2015 link (evidence to be produced)

b. Hostel Fees (for details refer Annexure-I)

Those who seek admission in the hostels are requested to bring a DD drawn in favour of “The Chief warden, NIT, Tiruchirappalli “, payable at Tiruchirappalli for a sum of Rs. 24,700/- towards the Hostel and mess fees. Further, the candidates are advised to bring necessary belongings.

6. General Information

i. Hostel Facilities: Separate Hostel facilities are available for boys and girls.

ii. Banking facility: State Bank of India (SBI) branch is functioning in NIT,Trichy (NITT), Campus. (Bank Branch Code: 1617). ATM(s) facility is also available.

iii. Location of the Institute: Tiruchirappalli is well connected by Air, Rail and Road network. NITT is situated in a place called “THUVAKUDI” on the northern side of the Tiruchirappalli - Thanjavur road, 20 Kms away from Tiruchirappalli junction. Tiruchirappalli Junction is one of the important Railway junctions of Southern Railways.

iv. How to reach NITT Campus: All mofusil buses plying between Tiruchirappalli Central Bus Stand and Thanjavur, stop at NITT Main Gate. (Tiruchirappalli Central Bus Stand is about half a KM from Tiruchirappalli Railway Junction).

v. Town Bus No. 128 from Tiruchirappalli Central Bus Stand to Thuvakudi stops at NITT (REC) Main Gate.

- A number of private Taxis, Call Taxis are available nearby Tiruchirappalli Junction and Central Bus Stand. The approximate Call Taxi fare from Tiruchirappalli Railway Station to NITT Main Building will be about Rs.450/-

- If you are getting down at Main guard Gate (Commercial Centre of Tiruchirappalli), number of town buses ply between Main guard Gate and Thuvakudi.
7. Dress Code

<table>
<thead>
<tr>
<th>Boys</th>
<th>All the boy students should come with formal dress to the class rooms &amp; computer labs, preferably full pant and shirt. Wearing T-shirts and other informal dresses in the class rooms is strictly prohibited.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>All the girl students should come with formal dress to the class rooms &amp; computer labs, in Saree or Churidhar with Dupatta. Wearing T-shirts and other informal dresses in the class rooms &amp; labs are strictly prohibited.</td>
</tr>
</tbody>
</table>

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**USE OF CELL PHONES / ELECTRONIC GADGETS IN THE ACADEMIC PREMISES IS STRICTLY PROHIBITED**

8. Contact Address

| Director | Dr. S. Sundarajan  
Director  
National Institute of Technology,  
Tiruchirappalli – 620 015.  
Phone No : +91 431 2503002  
Fax No : +91 431 2500133 |
|---|---|
| Chairperson-PG Admissions | Dr. N.Anantharaman  
Chairperson- PG Admissions  
National Institute of Technology  
Tiruchirappalli – 620 015.  
Phone No : +91 431 2503916  
Fax No : +91 431 2500133 |

9. Class work will commences on : **27.07.2015**

Dean (Academic)  
Director
## Annexure-I

### Fee Details

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Items of Fees &amp; Deposits</th>
<th>M.Tech.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I. Institute Fees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>A. One time Fees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Admission fee</td>
<td>200</td>
</tr>
<tr>
<td>2.</td>
<td>Grade card</td>
<td>150</td>
</tr>
<tr>
<td>3.</td>
<td>Medical Exam fee</td>
<td>100</td>
</tr>
<tr>
<td>4.</td>
<td>Alumni fee</td>
<td>500</td>
</tr>
<tr>
<td>5.</td>
<td>Institute Deposit (Refundable)</td>
<td>3,000</td>
</tr>
<tr>
<td>6.</td>
<td>Library Deposit (Refundable)</td>
<td>500</td>
</tr>
<tr>
<td><strong>Total A</strong></td>
<td><strong>4,450</strong></td>
<td></td>
</tr>
<tr>
<td><strong>B. Semester Fees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Tuition Fees*</td>
<td>35,000</td>
</tr>
<tr>
<td>2.</td>
<td>Computer Fee</td>
<td>1,000</td>
</tr>
<tr>
<td>3.</td>
<td>Internet Fee</td>
<td>300</td>
</tr>
<tr>
<td>4.</td>
<td>Library Fee</td>
<td>1,000</td>
</tr>
<tr>
<td>5.</td>
<td>Examination Fee</td>
<td>350</td>
</tr>
<tr>
<td>6.</td>
<td>Registration-Enrolment Fee</td>
<td>200</td>
</tr>
<tr>
<td>7.</td>
<td>Association and Cultural Fee</td>
<td>1,000</td>
</tr>
<tr>
<td>8.</td>
<td>Students Aid Fee</td>
<td>200</td>
</tr>
<tr>
<td>9.</td>
<td>Sports Center</td>
<td>100</td>
</tr>
<tr>
<td>10.</td>
<td>Medical and insurance Fee</td>
<td>200</td>
</tr>
<tr>
<td><strong>Total B</strong></td>
<td><strong>39,350</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total (A+B)</strong></td>
<td><strong>43,800</strong></td>
<td></td>
</tr>
<tr>
<td><strong>II. Hostel &amp; Mess Fees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>C. One time Fees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Hostel Admission Fee (Non-Refundable)</td>
<td>200</td>
</tr>
<tr>
<td>2.</td>
<td>Hostel Deposit (Refundable)</td>
<td>2,000</td>
</tr>
<tr>
<td><strong>Total C</strong></td>
<td><strong>2,200</strong></td>
<td></td>
</tr>
<tr>
<td><strong>D. Semester Fees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Establishment charges</td>
<td>3,000</td>
</tr>
<tr>
<td>2.</td>
<td>Mess Advance (Dining Charges)</td>
<td>13,500</td>
</tr>
<tr>
<td>3.</td>
<td>Room rent, Electricity and Water Charges</td>
<td>4,500</td>
</tr>
<tr>
<td>4.</td>
<td>Institute Festivals</td>
<td>1,500</td>
</tr>
<tr>
<td><strong>Total D</strong></td>
<td><strong>22,500</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total (C+D)</strong></td>
<td><strong>24,700</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total Hostel Fees with Extras</strong></td>
<td><strong>26,700</strong></td>
<td></td>
</tr>
</tbody>
</table>

* SC/ST students are exempted from payment of tuition fee.

** For Hostellers only.
ANNEXURE –II

(Certificate of Physical Fitness)
and
(OB/SC/ST/PWD Certificate Formats)
CERTIFICATE OF PHYSICAL FITNESS
(To be issued by a Medical Officer)

I, Dr._______________________________ (IMC. Reg. No._____________________), do hereby certify that I have examined Mr./Ms. ________________________________ a candidate for admission to the National Institute of Technology, Tiruchirappalli-15 and could not discover that he/she has any disease, constitutional affliction or bodily infirmity.

His/Her age according to his/her own statement is _____________ years and by appearance about _________ years.

Personal Marks of identification.

1. _______________________________________________________________________
2. _______________________________________________________________________
   a. Weight ________________  b. Height _____________________
   c. Chest measurement of full inspiration and expiration
   d. Acuteness of vision* (in case where sight is corrected with glasses for each eye should be noted)
   e. Whether any abnormality of heart or lung?
   f. Whether affected with hernia, hydeocele, vericocele, piles etc?
   g. Hearing whether normal?
   h. General health and build: whether good?

N.B: Any defects, deformities or other disabilities when present should be noted in detail.

Station: _______________________________ Signature: _______________________________

Date : _______________________________ Name: _______________________________

Seal:

( A Registered Medical Practitioner not below the rank of an Assistant Surgeon)

* Acuteness of vision:    Left Eye
                        Right Eye
FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR
APPOINTMENT TO POSTS / ADMISSION TO CENTRAL EDUCATIONAL INSTITUTES (CEIs), UNDER
THE GOVERNMENT OF INDIA

“This certificate MUST have been issued on or after 1st April 2015.”

This is to certify that Shri/Smt./Kum. ____________________________ Son/Daughter of Shri/Smt.
______________________________ of Village/Town ______________________________
District/Division ____________________________ in the _________________________ State belongs to the ________________________
Community which is recognized as a backward class under:

(i) Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in the Gazette of India Extraordinary Part I Section I No. 186 dated 13/09/93.
(ii) Resolution No. 12011/9/94-BCC dated 19/10/94 published in the Gazette of India Extraordinary Part I Section I No. 163 dated 20/10/94.
(iii) Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary Part I Section I No. 88 dated 25/05/95.
(iv) Resolution No. 12011/96/94-BCC dated 9/03/96.
(vi) Resolution No. 12011/13/97-BCC dated 03/12/97.

Shri/Smt./Kum. ____________________________ and/or his family ordinarily reside(s) in the __________________________
District/Division of __________________________ State. This is also to certify that he/she does not belong to the
persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of India, Department of Personnel
& Training O.M. No. 36012/22/93-Estt.(SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt.(Res.) dated
09/03/2004.

Dated:

District Magistrate/
Deputy Commissioner, etc.

Seal

NOTE:

(a) The term ‘Ordinarily’ used here will have the same meaning as in Section 20 of the Representation of the People
Act, 1950.

(b) The authorities competent to issue Caste Certificates are indicated below:

(i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy
Commissioner / Deputy Collector / First Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka
Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary
Magistrate).

(ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.

(iii) Revenue Officer not below the rank of Tehsildar and

(iv) Sub-Divisional Officer of the area where the candidate and / or his family resides.

OBC Certificate issued from Maharashtra State must be validated by social welfare Department of Maharashtra
Government.
FORM OF CERTIFICATE TO BE PRODUCED BY A CANDIDATE BELONGING TO SCHEDULED CASTE OR SCHEDULED TRIBE

This is to certify that Shri/Smt./Kum. _______________________________ Son/Daughter of Shri ________________ of village/Town _______________________________ in District/ Division _______________________________ of the State/Union Territory _______________________________, belongs to the __________________ caste/Tribe, which is recognized as a Schedule Caste/Scheduled Tribe under:

The Constitution (Scheduled Castes) order, 1950.
The Constitution (Scheduled Tribes) order, 1950.
The Constitution (Scheduled Castes)(Union Territory) order, 1951.
The Constitution (Scheduled Tribes) (Union Territory) order, 1951.

(As amended by the Scheduled Castes and Scheduled Tribes (Modification) Order 1956, the Bombay Reorganization Act, 1960, the Punjab Reorganization Act, 1966, The State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganization Act, 1971) and the Scheduled Castes and Scheduled Tribes orders (Amendment) Act, 1976.)

*The constitution (Jammu & Kashmir) Scheduled Caste Order, 1956;
*The Constitution (Andaman and Nicobar Islands) Scheduled Tribes, 1959, as amended by the Scheduled Castes and Scheduled Tribes orders (Amendment) Act. 1976;
*The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order 1962;
*The Constitution (Dadra & Nagar Haveli) Scheduled Tribes Order, 1962;
*The Constitution (Pondichery) Scheduled Castes Order, 1964;
*The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967;
*The Constitution (Goa, Daman & Dieu) Scheduled Castes Order, 1968;
*The Constitution (Goa, Daman & Dieu) Scheduled Tribes Order, 1968;
*The Constitution (Nagaland) Scheduled Tribes Order, 1970;
*The Constitution (Sikkim) Scheduled Castes Order, 1978;
*The Constitution (Sikkim) Scheduled Tribes Order, 1978;
*The Constitution (Scheduled Tribes) Ordinance, 1996

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribes Certificate issue to Shri ____________________________________________ Father of Shri ____________________________________________ of village/town ____________________________________________ in District/Division ________________ of the State/UT ________________ who belongs to the __________________ caste/Tribe which is recognized as a SC/ST in the State/Union Territory ________________ issued by the ____________________________ (name of the prescribed issuing authority) vide their No. ________________ dated ________________ or Shri ____________________________________________ and or his/her family ordinarily reside(s) in Village/Town ____________________________________________ of District/Division of the State/Union Territory of ________________.

Place______________ Signature______________
Date_______________ Designation______________
(With seal of Office)

NOTE: - The terms ordinarily reside(s) used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

SC Certificate issued from Maharashtra State must be validated by Social Welfare Department and ST Caste certificate must be validated by Tribal Development Department of Maharashtra Government

LIST OF AUTHORITIES EMPOWERED TO ISSUE CASTE/TRIBE CERTIFICATE:


3. Revenue Officers not below the rank of Tahsildar.

4. Sub-Divisional Officers of the area where the candidate and/or his family normally resides.
**PWD Certificate Format**

Format for Physically Challenged (PH)/Persons with Disabilities (PWD) Certificate  
(To be obtained by the candidate)  
(To be filled by Medical Board notified under PWD Act)

Certificate No:
Date:

This is to certify that Mr./Ms______________________________________________________________
son / daughter of Mr./Mrs.______________________________________________________ Age
____________________male/female, Registration No.______________________________is
a case of ______________________. He/She is physically disabled/visual disabled/speech and hearing
disabled/having mental retardation/leprosy cured and has %(______________________per cent)
permanent (physical impairment/visual impairment/speech and hearing impairment etc.) in relation to
his/her __________________________________________.

Note:
This condition is progressive/not progressive/likely to improve/not likely to improve*.
1. Re-assessment is not recommended/ is recommended after a period of___________months/years*.
   (*Strike out whichever is not applicable)

Signature of Dr.                   Signature of Dr.                   Signature of Dr.
Name of Dr.                       Name of Dr.                       Name of Dr.
Specialization                    Specialization                    Specialization
Seal with Degree                  Seal with Degree                  Seal with Degree
(Member, Medical Board)

Seal

Signature/Thumb impression of Patient

Countersigned by the
Medical Superintendent/CMO/Head of Hospital (with seal)